

CAMP COCHIPIANEE

COUNSELOR IN TRAINING (CIT) INFORMATION FORM

(Please fill out neatly and legibly.)

EMPLOYEE (Print clearly)

Name _____

Email _____

Phone _____

WORK WEEK SCHEDULE

June 26 - Aug 4 (6 weeks)

Counselors, CIT's & Jr. CIT's

Monday - Friday | 8:30am - 3:30pm

Weekly Wednesday Meeting | 3:30-4:00pm

Waterfront Staff

Monday - Friday | 9:30am - 3:00pm

Weekly Wednesday Meeting | 3:30-4:00pm

Times subject to change if there is an addition of morning and afternoon extended camp.

Would you be available for extended camp?

AM _____ (30 min early) PM _____ (1 hour later)

CAMP DATES

Mark all weeks to confirm you will be available. Specific schedule updates posted once all staff are hired. (Please indicate if there is a specific day you will be unable to work.)

____ Week 1 | June 26-June 30

____ Week 2 | July 3-7 (No camp 4th of July)

____ Week 3 | July 10-14

____ Week 4 | July 17-21

____ Week 5 | July 24-28

____ Week 6 | July 31- August 4

____ Cleanup | Mon, Aug 7, 9am-2pm

Unavailable Date _____

RETURN APPLICATION:

Deadline | March 31, 2023

Send via email with "CIT" and last name in the subject line to:

parkandrec@goshenct.gov

OR

Drop off to the Recreation Office at Town Hall
42 North St 2nd floor

OR

Mail to

Erin Reilly, Recreation Director

42A North Street

Goshen, CT 06756

REQUIRED STAFF TRAINING

We require all staff be available for training. Confirm all dates that you will be present.

____ Wednesday, June 21, 9am-3pm (Counselors & CIT's)

____ Thursday, June 22, 9am-3pm (Counselors, CIT's,
Jr CIT's and Waterfront)

____ Friday, June 23, 9am-3pm (Counselors, CIT's,
Jr CIT's and Waterfront)

GROUP

Check your preferred age group to work with.

____ Pre K

____ K-1

____ 2-3

____ 3-4

____ 5-6

____ Any

HISTORY

Have you ever worked at Camp Cochipianee before?

____ Yes _____ Year(s)

____ No